

Work Order ID 102039-1

May-22-13 1:35:17 PM

SPLIT-1

CL 13/08/23

102039

Page 1

Item ID: D4410-5

Revision ID:

Item Name: Face Plate

Start Date: 5/22/13

Start Qty: 6.00

Required Date: 6/05/13

Req'd Qty: 6.00

Reference:

PRELIMINARY ISSUE

Accept

Rev B

5/14/13

N900040100

Setup Start *NS1*

Stop *NS2*

Cust Item ID:

Customer:

Approvals:

Process Plan: MLS

Date: 13-05-23

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

Rev B 5/14/13

D4410

REV B

PC2 A

100

0.00

100

Waterjet

Memo

0.00

FLOW CNC Waterjet

CUT AS PER DWG

DWG REV: B

PROG REV: B

DEBURR

110

QC2- Inspect parts off machine FAI/FAIB

0.00

110

QC

Memo

0.00

Quality Control

11/6

0

13-06-29
13-08-13

11/6

0

13-06-29
13-08-13

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 102039

May-22-13 1:35:17 PM

102039

Page 2

Item ID: D4410-5

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Face Plate

Start Date: 5/22/13 Start Qty: 6.00

6

Cust Item ID:

Required Date: 6/05/13 Req'd Qty: 6.00

6

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

130 QC8- Inspect parts - second check

0.00

130

QC

Memo

0.00

Quality Control

Handwritten: 13.8 13

Handwritten: 11
inspect on per
Dwg PC2

170 Outsource process-Anodize per QSI017 4.1.10.1

0.00

170

Outsource4

Memo

0.00

Outsource process - Anodize

Issue P/O: 20929
Black Anodize as per Dwg D4410

Handwritten: Q13108114 (11)

180 Receive & Inspect for Damage & Mat'l Certs

0.00

180

Packaging

Memo

0.00

Packaging

Handwritten: 11X

Handwritten: SP
13-8-23

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
--	---	---

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 102039

May-22-13 1:35:17 PM

102039

Page 3

Item ID: D4410-5

Revision ID:

Item Name: Face Plate

Start Date: 5/22/13

Start Qty: 6.00

Required Date: 6/05/13

Req'd Qty: 6.00

Reference:

Accept

N900040100

Setup Start *NS1*

Stop *NS2*

Cust Item ID:

Customer:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

190

QC5- Inspect part completeness to step on W/O

0.00 27
9-89

190

QC

Quality Control

Memo

0.00 13.8. 23

1 ~~1~~
inspect as per
dwg PC2

220

Identify as per dwg & Stock Location:
Packaging

0.00

220

Packaging

Packaging

Memo

0.00

13/8/23 sl

230

QC21- Final Inspection - Work Order Release

0.00

230

QC

Quality Control

Memo

0.00

MB-08-22

Rematch to Rev B
S1410102 (14)

MB-08-22

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
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<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
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		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Picklist Print

May-22-13 1:35:20 PM

Page 1

Work Order ID: 102039

102039

Parent Item: D4410-5

D4410-5

Parent Item Name: Face Plate

Start Date: 5/22/13

Required Date: 6/05/13

Start Qty: 6.00

Required Qty: 6.00

Comments: IPP REV:A NEW ISSUE 11-11-02 JLM VERIFIED BY:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

M6061T6S.040

Purchased

No

sf

672.2756

0.568421

M6061T6S 040

6061-T6 .040 Sheet

**

126350 → 1.03 *Le*
13.08.13

Smb
B 8.13

Location

Loc Qty

Loc Code

MAT021

672.2756

121099

273.7156

123874

398.56

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

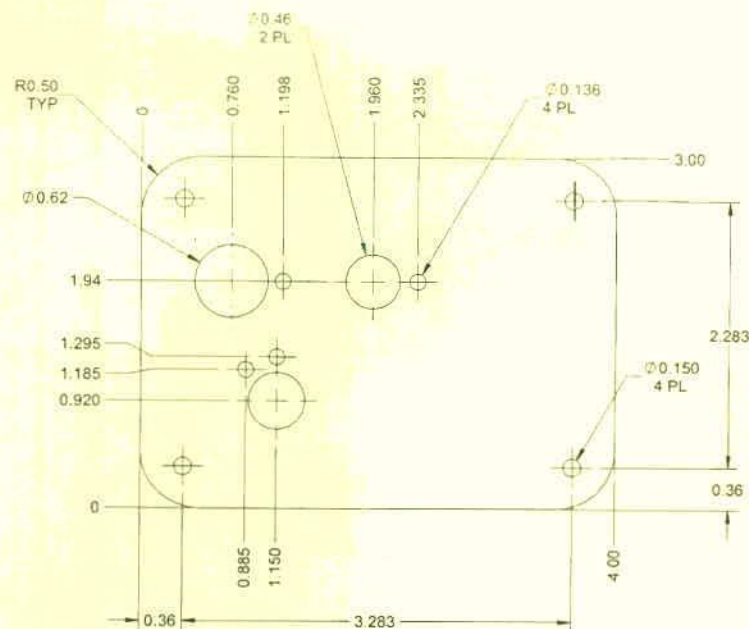
QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
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Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear	General		
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset	<input type="checkbox"/> Pressure/Forced
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Temperature/Cure
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Weld
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Wrong Stock Pulled
			<input type="checkbox"/> Other



D4410-5 FACE PLATE

NOTES:

- 1) MATERIAL: 6061-T6/T62 ALUMINUM SHEET, 0.040 THK.
QQ-A-250/11 OR AMS-QQ-A-250/11
OR AMS 4025 OR AMS 4027
OR ASTM B209
REF. DART SPEC. M6061T6S 040
- 2) FINISH: ANODIZE BLACK PER MIL-A-8625F TYPE I OR IB OR IC OR II OR IIB CLASS 2
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 0.04 lbs

SHOWN
REPAIR
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AND REMAINS
WITHOUT NOTICE
WORK ORDER

NO. 102039 MCT
13-05-23

RELEASED
2012-09-28

DESIGN	DC	DART AEROSPACE USA, INC.	
DRAWN	DC	KENT, WA	
CHECKED	SE	DRAWING NO.	REV. 5
MFG. APPR.	ST	D4410	SHEET 7 OF 12
APPROVED	MD	TITLE	SCALE
DE APPR.	HA	CO-PILOT COLLECTIVE HEAD	NTS
DATE	12.07.30	<small>COPYRIGHT © 2011 BY DART AEROSPACE USA, INC. THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE USA, INC.</small>	

DART AEROSPACE LTD		Work Order: 102039
Description: FACE PLATE		Part Number: 4410-5
Inspection Dwg: 4410	Rev: 8 PCO	Page 1 of 1

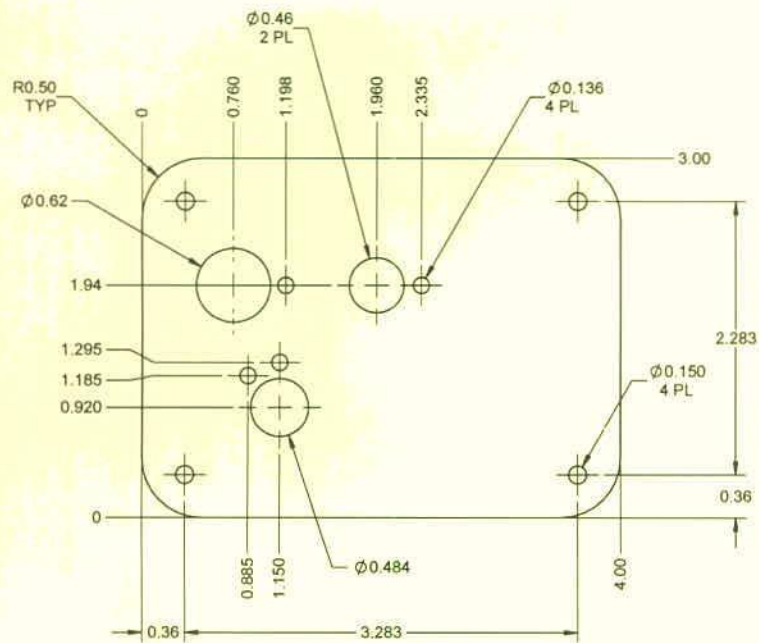
FIRST ARTICLE INSPECTION CHECKLIST

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
RO.50						
Ø 0.62	+ .005 - .001	.62	-		✓	
Ø .136	+ .005 - .001	.136	-		✓	
Ø .150	+ .005 - .001	.150	-		✓	
1.94	+/- .030	1.94	-		✓	
1.295	+/- .010	1.295	-		✓	
1.185	+/- .010	1.185	-		✓	
.920	+/- .010	.920	-		✓	
.36	+/- .030	.35	-		✓	
.885	+/- .010	.885	-		✓	
1.150	+/- .010	1.150	-		✓	
3.283	+/- .010	3.283	-		✓	
4.00	+/- .030	4.00	-		✓	
.36	+/- .030	.36	-		✓	
2.283	+/- .010	2.283	-		✓	
3.00	+/- .030	3.00	-		✓	
2.335	+/- .010	2.335	-		✓	
1.960	+/- .010	1.960	-		✓	
1.198	+/- .010	1.198	-		✓	
.760	+/- .010	.760	-		✓	
.040	+/- .010	.040	-		✓	
Ø .46	+ .006 - .001	.46	-		✓	
Ø .484	+ .006 - .001	.484	-		✓	

Measured by: Ak	Audited by: DAS	Preliminary Approval:
Date: 13.08.13	Date: 13.8.13	Date:

Rev	Date	Change	Revised by	Approved
E	10.04.14	Added preliminary approval	KJ	

10.04.15



D4410-5 FACE PLATE

NOTES:

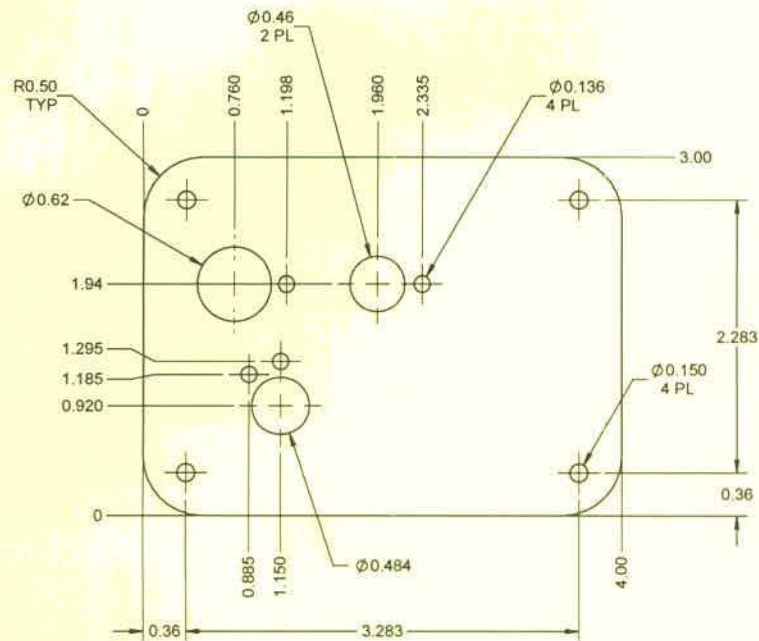
- 1) MATERIAL: 6061-T6/T62 ALUMINUM SHEET, 0.040 THK
QQ-A-250/11 OR AMS-QQ-A-250/11
OR AMS 4025 OR AMS 4027
OR ASTM B209
REF. DART SPEC. M6061T6S.040
- 2) FINISH: ANODIZE BLACK PER MIL-A-8625F TYPE I OR IB OR IC OR II OR IIB CLASS 2
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 0.04 lbs

PRELIMINARY ISSUE

13.07.11

DESIGN	<i>OS</i>	DART AEROSPACE USA, INC.	
DRAWN	<i>OS</i>	KENT, WA	
CHECKED	<i>DC</i>	DRAWING NO.	REV. PC2
MFG APPR.	<i>ST</i>	D4410	SHEET 7 OF 14
APPROVED		TITLE	SCALE
DE APPR.		CO-PILOT COLLECTIVE HEAD	
DATE	13.07.11	NTS	

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NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT
WRITTEN PERMISSION FROM DART AEROSPACE USA, INC.



D4410-5 FACE PLATE

PRELIMINARY ISSUE

13.07.11

NOTES:

1) MATERIAL: 6061-T6/T62 ALUMINUM SHEET, 0.040 THK
 QQ-A-250/11 OR AMS-QQ-A-250/11
 OR AMS 4025 OR AMS 4027
 OR ASTM B209
 REF. DART SPEC. M6061T6S.040

2) FINISH: ANODIZE BLACK PER MIL-A-8625F TYPE I OR IB OR IC OR II OR IIB CLASS 2
 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
 4) UNITS: INCHES UNLESS OTHERWISE NOTED
 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
 7) WEIGHT: 0.04 lbs

DESIGN	OS	DART AEROSPACE USA, INC.	
DRAWN	OS	KENT, WA	
CHECKED	DC	DRAWING NO.	REV. PC2
MFG APPR	21	D4410	SHEET 7 OF 14
APPROVED		TITLE	SCALE
DE APPR		CO-PILOT COLLECTIVE HEAD	NTS
DATE	13.07.11	<small>COPYRIGHT © 2011 BY DART AEROSPACE USA, INC. THIS DOCUMENT IS PROPRIETARY AND IS SUPPLIED ON THE EXPRESS UNDERSTANDING THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE USA, INC.</small>	



A.T.G. Industries Inc.
731, rue Industrielle Rd.
PLATING DEPARTMENT
Rockland, On K4K 1T2
Canada
Ph: (613) 446-4544
Fax: (613) 446-4556

Pack List

Number: 62582

Date: 22-Aug-13

To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ship To


DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms		Ship Via	
Quantity	Description		
1 lot	Part: ASST 11 PCS D4410-5 19 PCS D2348 BLACK ANODIZE MIL-A-8625 TYPE II CLASS 2 Job: 20130531	Rev:	Line:
PO: 20929			
Certificate of Conformance			
A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.			
ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY			
DATE : 22/8/13			
CERTIFIED SIGNATURE : 			
RECEIVER SIGNATURE : _____			



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO20929

Purchase Order Date 8/14/2013

PO Print Date 8/23/2013

Page Number 1 of 5

Order From :

A.T.G. INDUSTRIES INC.
731 INDUSTRIELLE ROAD
ROCKLAND, ON K4K 1T2
CANADA

VC-ATG001

Ship To : DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

RECEIVED
FAXED

Contact Name

Vendor Phone

613-446-4544

Ship To Contact

Ship To Phone

Ship Via:

Delivered

Ship Acct:

Buyer

Chantal Lavoie

Customer POID

Customer Tax #

10127-2607

Terms

Net 30

Currency

CAD

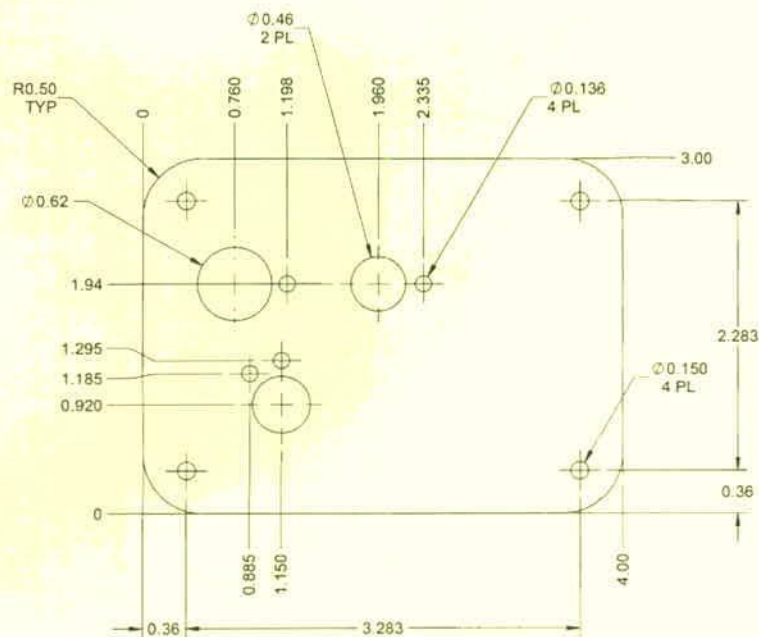
FOB

FCA - (Free Carrier)

Line Nbr	Reference Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable Promise Date	CD	Req Qty/ Unit of Measure	PO Unit Price	Extended Pri
1	102039	D4410-5 FACE PLATE	8/30/2013 Yes 8/30/2013		11.00	\$1.41	\$15.31
FINISH: BLACK ANODIZE PER MIL-A-8625F TYPE I/IB/IC/II/IIB CLASS 2							
Line Total:							\$15.31
2	99627	D2348 WEARPLATE	8/30/2013 Yes 8/30/2013		19.00	\$1.41	\$26.59
FINISH: BLACK ANODIZE PER MIL-A-8625F TYPE I/IB/IC/II/IIB CLASS 2							
Line Total:							\$26.59
3	102843	646.3012 LOWER GUIDE	8/30/2013 Yes 8/30/2013		10.00	\$0.00	\$0.00
FINISH: HARD BLACK ANODIZE IAW MIL-A-8625 TYPE III CLASS 2							
FINISH: PRIME IAW MIL-P-23377 J TYPE I CLASS N							

Note:

8/23/2013



D4410-5 FACE PLATE

NOTES:

1) MATERIAL: 6061-T6/T62 ALUMINUM SHEET, 0.040 THK
 QQ-A-250/11 OR AMS-QQ-A-250/11
 OR AMS 4025 OR AMS 4027
 OR ASTM B209

REF. DART SPEC. M6061T6S.040

2) FINISH: ANODIZE BLACK PER MIL-A-8625F TYPE I OR IB OR IC OR II OR IIB CLASS 2

3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED

4) UNITS: INCHES UNLESS OTHERWISE NOTED

5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX

6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1

7) WEIGHT: 1.04 lbs

RELEASED
 2012-09-28

DESIGN	DL	DART AEROSPACE USA, INC.	
DRAWN	DL	KENT, WA	
CHECKED	DL	DRAWING NO.	REV. B
MFG. APPR.	DL	D4410	SHEET 7 OF 12
APPROVED	DL	TITLE	SCALE
DE APPR.	DL	CO-PILOT COLLECTIVE HEAD	NTS
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